

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0011850
Insp Area: 4

Site Address: 191 LATHROP WY SAC
Parcel No: 275-0300-017 SUITE G

Sub-Type: REM
Housing (Y/N): N

CONTRACTOR

OWNER
NORTH SACTO. LAND CO.
400 SLOBE AVE
SACRAMENTO CA 95815

ARCHITECT
MITCH BJORGUM
9806 OLD WINERY PL #1
SAC. CA. 95827

Nature of Work: INTERIOR OFFICE REMODEL.

CONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____ Lender's Address _____

LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class _____ License Number _____ Date _____ Contractor Signature _____

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code: any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.00).

_____ I, as a owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his/her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he/she did not build or improve for the purpose of sale.)

Day as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

_____ I am exempt under Sec. _____ B & PC for this reason: _____

X Date 11-8-2000 X Owner Signature *Debra A Green*

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvement to be constructed does not violate any law or private agreement relating to permissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of any improvement or the violation of any private agreement relating to location of improvements.

I certify that I have read this application and state that all information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

X Date 11-8-2000 X Applicant/Agent Signature *Debra A Green*

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:
_____ I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.

_____ I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier _____ Policy Number _____ Exp Date _____

Day This section need not be completed if the permit is for \$100 or less. I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

X Date 11-8-2000 X Applicant Signature *Debra A Green*

WARNING FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION
 1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0011850	Insp. Area 4C
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 191 LATHROP WAY Suite G
 PARCEL # 215-0800-017

<p style="text-align: center;">CONTACT</p> Name <u>MITCH BJORGUM</u> Street Address <u>9806 OLD WINERY PL. #1</u> City/State/Zip <u>SACTO, CA 95827</u> Phone <u>916-854-9901</u> FAX <u>916-854-9840</u> E-mail: <u>GBDH@GBDHDESIGN.COM</u>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # _____</p> Name <u>OWNER BUILDER</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____
<p style="text-align: center;">ARCHITECT/ENGINEER</p> Name <u>SAME AS CONTACT</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	<p style="text-align: center;">OWNER</p> Name <u>NORTH SACRAMENTO LAND CO.</u> Address <u>400 SLOBE AVE</u> City/State/Zip <u>SACTO, CA - 95815</u> Phone <u>916 925 2721</u> FAX <u>916 925 2307</u> E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: TENANT IMPROVEMENT
INTERIOR OFFICE REMODEL

OCCUPANT/TENANT: INTERTEL TECHNOLOGIES INC. VALUATION: \$ 39,085

FLOOD STATUS:				S.C.A.T.								
JOB DESCRIPTION		BLDG	SHELL	APT	TI ()	REM <input checked="" type="checkbox"/>	SW	FIRE	ADD	OTH		
INSPECTION DISCIPLINES		<u>BLDG</u>	<u>MECH</u>	PLUMB	<u>ELEC</u>	SITE	<u>FIRE</u>					
# Stories	1st firArea.	Total Area	Use Zone	Occp Group	Const type	Fire Req. <u>Y</u> N	Fed Code	Vio. File				
				<u>B</u>	<u>V-N</u>	<u>SPR</u> ALARM	<u>15</u>	[H] [Quad]				
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E 3</u>	<u>F</u>	<u>S</u>	<u>D</u>	PW	UTIL			

COMMENTS: 2013 PROJECT AREA

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION

EXPRESS PLAN REVIEW

SUBMITTAL DATES					
1st Review		2nd Review		3rd Review	
IN	OUT	IN	OUT	IN	OUT
/ /	/ /	/ /	/ /	10/30/00	/ /

PLAN CHECK # _____
 ADDRESS: _____
 Commercial Residential



ACCEPTED by (Staff) _____

DISCIPLINE	1ST REVIEW			2ND REVIEW			3RD REVIEW		
	Staff	Staff	Date	Status	Staff	Date	Status	Staff	Date
CESSARY	3	KL	10/6	13	KL	10/20			
STRUCTURAL	3	KL	10/6	13	KL	10/20			
MECHANICAL/PLUMBING	13	KL	10/6						
ELECTRICAL	3	AM	10/6/00	3	KL	10-20-00	13	AM	11/1/00
FIRE	13	KL	10/6						
PLANNING									

STAFF COMMENTS: _____

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no) _____
2. I (have/have not) _____ signed an application for A building permit for the proposed work.
3. I have contracted with the following person (firm) to provide the proposed construction:

Name TBD Address _____
City _____ Telephone _____
Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, Supervise, and provide the major work.

Name _____ Address _____
City _____ Telephone _____
Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the Work indicated:

Name	Address	Phone	Type of work

X Signed Walter Green

Job Address 191 LATHROP WY X DATE 11.8.2000

Permit No: 0011850

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 12-28-00

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

191 LANTROP #6

has been conducted by Inspector LEAVITT

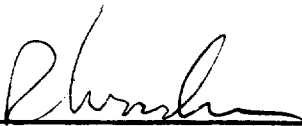
on 12-28-00

00-11850-194
Permit Number 194

787
Square Footage

RI/RENOVA
Type of Inspection

The system is acceptable by this department.


By: **Ross L. Woodman,**
Fire Prevention Officer II

II-789
F. D. Reference Number



RIVER CITY

Heating & Air Conditioning

HVAC AIR BALANCE REPORT

PROJECT NAME: INTERTEL

PROJECT ADDRESS: 191 LATHROP WAY, BUILDING G

MECHANICAL ENGINEER: RIVER CITY HEATING & A/C

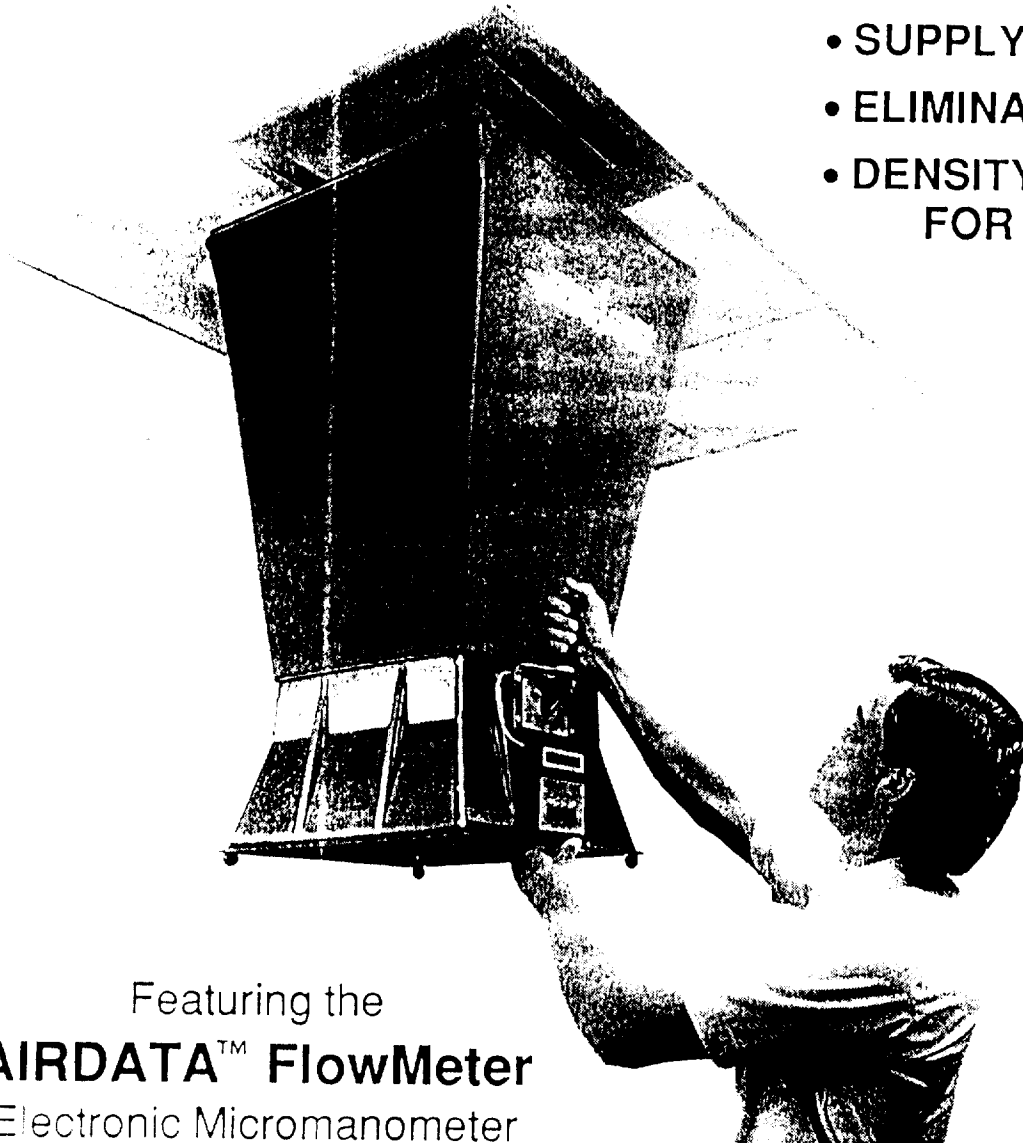


BACKPRESSURE COMPENSATED
AIR BALANCE SYSTEM

ELECTRONIC CFM-88

FOR AIR FLOW ONLY

- FAST, ACCURATE, EASY
- AUTO RANGE AND ZERO
- 25 TO 2500 CFM RANGE
- SUPPLY AND EXHAUST
- ELIMINATES A_k FACTORS
- DENSITY CORRECTED
FOR BAROMETRIC
PRESSURE



Featuring the
AIRDATA™ FlowMeter
Electronic Micromanometer

- DIRECT DIGITAL READOUT IN ENGLISH AND METRIC UNITS •



Shortridge Instruments, Inc.

7855 EAST REDFIELD ROAD / SCOTTSDALE, ARIZONA 85260
TELEPHONE (602) 991-6744 / FAX (602) 443-1267



MODEL CFM-88

BACKPRESSURE COMPENSATED AIR BALANCE SYSTEM

AIR FLOW ONLY

The FlowHood CFM-88 is designed for air flow measurement only. If you need a multi-function instrument, see the brochures for the ADM-850, 860 or 870 AirData Multimeters, which also measure velocity, pressure, and temperature, and include memory, and average and other functions.

DIGITAL READOUT

The FlowHood CFM-88 uses the electronic, digital AirData Flowmeter for direct readout at supply, return, or exhaust outlets in cfm or litres/sec. This rugged, shock resistant meter automatically selects the proper range and corrects for local air density. These features eliminate several error factors and the calculations necessary to convert air flow readings to true local density results. Internal calibration and zeroing are fully automatic. No adjustments are ever needed.

NO A_x FACTORS REQUIRED

The FlowHood unit captures the air flow from an outlet or inlet and directs it across the highly sensitive flow sensing manifold within the FlowHood base. The sensed total pressure and static pressures are averaged to a single velocity pressure, which is transmitted to the meter for conversion to direct air flow readout. The FlowHood is a much faster and more accurate alternative to time consuming multiple velocity readings across air diffusers. This instrument completely eliminates the use of A_x factors, and the calculations required to convert the average velocity into air flow.

BACKPRESSURE COMPENSATED

The air delivery of an air outlet or inlet is always reduced to some degree when a capture hood is in place. The flow reduction depends on the ratio of the outlet resistance to the FlowHood resistance. This "backpressure" caused flow reduction is unpredictable from one outlet or damper setting to another.

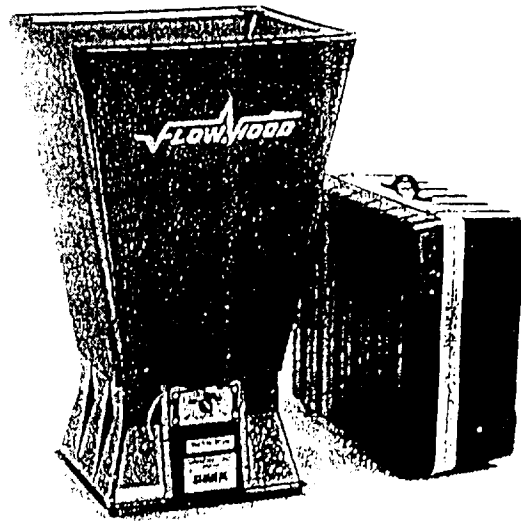
The electronic FlowHood combines an innovative design concept with state of the art microprocessor technology to calculate the backpressure effect of the FlowHood. The displayed reading indicates the true air flow through the outlet that exists when the FlowHood is not in place.

AIR DENSITY CORRECTED

Air flow readings are automatically corrected for the density effect of barometric pressure and altitude.

COMPLETE AIR BALANCE SYSTEM

The CFM-88 FlowHood includes the CFM-88 FlowMeter, the base metering section with velocity averaging grid, various top sizes and rugged carrying case. See our factory price sheet for available FlowHood top combinations. Special order top sizes are available.



MULTIFUNCTION CFM-850

The FlowHood air balance system may also be ordered as a model CFM-850 with the multipurpose ADM-850 AirData Multimeter. This meter measures pitot tube velocity, static pressure and temperature, in addition to airflow. Refer to the ADM-850 brochure.

UPGRADE LATER

The CFM-88 meter may be converted at any time into any of the multifunction "ADM" series AirData Multimeters.

SPECIFICATIONS

AIR FLOW: Measured in cubic feet per minute (cfm) and litres per second (L/s) corrected for local air density. The measurement range is 25-2000 cfm supply and 25-1500 cfm exhaust. Accuracy is $\pm 3\%$ of reading ± 5 cfm over 50 cfm.

AIR DENSITY CORRECTION: The air density correction range is $\pm 20\%$ for air flow measurement. The readings represent local density air flow (cfm or L/s).

CALIBRATION: Each meter certified, NIST traceable standards.

RESPONSE TIME: Five seconds for air flows greater than 180 cfm, and up to eight seconds at less than 70 cfm.

POSITION SENSITIVITY: Unaffected by position or vibration.

READOUT: 8 digit, 0.5" high contrast, liquid crystal display (LCD).

WEIGHT: FlowHood unit with meter and 2'x2' top, 10.0 lbs.

UNIT DIMENSIONS: Height 40"; top 24"x24"; base 14"x14".

BATTERY LIFE: 2000 readings per charge, 500 recharge cycles.



Shortridge Instruments, Inc.

7855 EAST REDFIELD ROAD / SCOTTSDALE, ARIZONA 85260

TELEPHONE (602) 991-6744 / FAX (602) 443-1267

JUNE 1982

CO 079511

AIRDATA MULTIMETER/FLOWMETER CERTIFICATE OF CALIBRATION

S/N: M99420

Customer: Riverside City Heating & Air Conditioning

State: CA

Order #: 992752

Model #: 52

PO #

Calibration Due Date:

QA Code:

10CFR21:

Procedure used: Calibration Procedure for AirData Multimeters

Revision: 05

Dated: 05/18/99

Pressure Standard: Heise #1 S/N: 41739/42449

Calibration Date: 11/25/98

Calibration Due Date: 11/2000

Test 1 Test 2 Test 3

Pressure Standard: Heise #3 S/N: 41738/42448

Calibration Date: 11/25/98

Calibration Due Date: 11/2000

Test 1 Test 2 Test 3

Pressure Standard: Heise #5 S/N: 41740/42450

Calibration Date: 11/25/98

Calibration Due Date: 11/2000

Test 1 Test 2 Test 3

Pressure Standard: DCE In-Wc Differential Pressure Set Point

Rated Accuracy: 0.07% fs (0.000175 in wc)

Uncertainty: 0.00035

Pressure Standard: AirData Multimeter S/N: M99420

Calibration Date: 09/18/99

Calibration Due Date: 09/2000

Test 1 Test 2 Test 3

Pressure Standard: AirData Multimeter S/N: M96455

Calibration Date: 09/18/99

Calibration Due Date: 09/2000

Test 1 Test 2 Test 3

Pressure Standard: AirData Multimeter S/N: M96100

Calibration Date: 09/18/99

Calibration Due Date: 09/2000

Test 1 Test 2 Test 3

Rated Accuracy: Absolute Pressure ± 0.5 % ± .02 in Hg

Differential Pressure: ± 0.5 % ± 0.0001 in wc

Uncertainty: As stated at test points.

Temperature Standards Rated Accuracy: Thermometer .023° F / Thermistor .018° F

Total Temperature System Uncertainty: 0.039° F

Thermometer S/N 92143/Thermistor S/N 871513

Calibration Dates: 02/24/99;02/01/99

Cal Due Date: 02/2001

Set Point: 35° F 95° F 155° F

Thermometer S/N 8A089/Thermistor S/N 881708

Calibration Dates: 10/09/98;10/28/98

Cal Due Date: 10/2000

Set Point: 35° F 95° F 155° F

Thermometer S/N 92142/Thermistor S/N 850104

Calibration Dates: 02/16/99;02/01/99

Cal Due Date: 02/2001

Set Point: 35° F 95° F 155° F

Vel Flow Standard: AirData Multimeter S/N: M99420

Calibration Date: 09/18/99

Calibration Due Date: 09/2000

Test 1 Test 2 Test 3

Vel Flow Standard: AirData Multimeter S/N: M96455

Calibration Date: 09/18/99

Calibration Due Date: 09/2000

Test 1 Test 2 Test 3

Vel Flow Standard: AirData Multimeter S/N: M96100

Calibration Date: 09/18/99

Calibration Due Date: 09/2000

Test 1 Test 2 Test 3

Rated Accuracy: Velocity: ± 2.0 % ± 3 fpm

Flow: ± 2.0 % ± 3 cfm

Uncertainty: See Uncertainty Table

METER ACCURACY TESTS

Test By: [Signature] Date: 12-28-99 Rh: 77 Ambient Temperature: 77 Within spec: YES NO

Test By: Date: Rh: Ambient Temperature: Within spec: YES NO

Test By: Date: Rh: Ambient Temperature: Within spec: YES NO

TEMPERATURE TEST (° F) TOLERANCE = ± 0.2° F

Table with 9 columns: Approx Set Point, Master Meter, Test Meter, Diff, Master Meter, Test Meter, Diff, Master Meter, Test Meter, Diff. Rows for 35, 95, 155 degrees.

ABSOLUTE PRESSURE TEST (in Hg) TOLERANCE = ± 2.0 % ± .1 in Hg

Table with 9 columns: Approx Set Point, Master Meter, Test Meter, % Diff, Master Meter, Test Meter, % Diff, Master Meter, Test Meter, % Diff. Rows for 14.3, 28.4, 40.9 in Hg.

DIFFERENTIAL PRESSURE TEST (in wc) TOLERANCE = ± 2.0 % ± 0.001 in wc

Table with 9 columns: Approx Set Pt, Master Meter, Test Meter, % Diff, Master Meter, Test Meter, % Diff, Master Meter, Test Meter, % Diff. Rows for various pressure points from 0500 to 5000.

Shortridge Instruments, Inc. 7855 E. Redfield Rd Scottsdale, AZ 85260

AIRDATA MULTIMETER/FLOWMETER CERTIFICATE OF CALIBRATION

S/N: M99983
Order #: _____

LOW VELOCITY/FLOW CONFIRMATION (AIRFOIL/FLOW MODE)
TEST METER TOLERANCE = ± 3.0% ± 7 FPM/CFM

Approx. Set Point	Master Meter	Test Meter	Diff	Master Meter	Test Meter	Diff	Master Meter	Test Meter	Diff
100	129.1	130	+0.9						
500	535.9	535	-0.9						

ADM-870 and ADM-860 AirData Multimeters are read in AirFoil Mode. ADM-850 and CFM-88 meters are read in air flow.

UNCERTAINTY TABLE (All AirData Multimeter Calibration Standards)

Mode	Differential Pressure (in wc)								Absolute Pressure (in Hg)			Velocity/Flow	
	1250	2250	2700	2.000	3.600	4.400	27.00	50.00	14.0	28.4	40.0	100.0	500.0
Max U ₉₅	< .00022	< .00023	< .00031	< .0005	< .0015	< .0023	< .006	< .007	< .02	< .02	< .02	< 3.99	< 1.82

All uncertainties are expressed in expanded terms (twice the calculated uncertainty). Uncertainties shown for Low Velocity/Flow Confirmation represent uncertainty of the Transfer Standard Meter exposed to the pressure source only.

NOTES

This instrument has been calibrated using Calibration Standards which are traceable to NIST (National Institute of Standards and Technology). Quality Assurance Program and calibration procedures meet the requirements for 10CFR50 Appendix B; ANSI/N45.2; ANSI/NCSL Z540-1-1994; MIL-STD 45662A and manufacturers specifications. Calibration accuracy is certified when meters are used with properly functioning accessories only. This report shall not be reproduced, except in full, without the written approval of Shortridge Instruments, Inc. Results relate only to the item calibrated.

Calibration Technician(s): Tom J. Wainwright Calibration Date: 12-28-99
 Calibration Approved by: [Signature] Title: Prog. Mgr Date: 12-28-99

Shortridge Instruments, Inc.
7855 E. Redfield Rd Scottsdale, AZ 85260
(480) 991-6744 Fax (480) 443-1267

RIVER CITY

Heating & Air Conditioning

JOB NO. INTERTEL

SECTION _____ PAGE 1

DATE 12/28/00

AIR BALANCE REPORT

FAN & OUTLET TEST SHEET

AREA SERVED Reception / conference / show Room
Area 101-106

UNIT A/C-1

MOTOR NAMEPLATE DATA

MFG AO Smith FR _____
HP 3/4 V 208 FLA 5.7
PH 1 SF TH RPM 1175

SHEAVE DATA:

DIA _____ SHAFT _____
ADJ _____ % _____ FIXED X

FAN NAMEPLATE DATA

MFG RHEEM
MODEL RGG06074AJQ

SERIAL#

SIZE 5 ton Gas/EIEC

SHEAVE DATA:

DIA _____ SHAFT _____
BELTS Direct Drive

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS		<u>208</u>	
AMPS		<u>5.4</u>	
BHP		<u>DNL</u>	
RPM		<u>1150</u>	
SP-			
SP+		<u>.50</u>	
TSP			
FILTER SP			
CFM TOTAL		<u>1906</u>	
CFM RA		<u>1546</u>	
CFM OA		<u>360 *</u>	

FAN DESIGN DATA

CFM 1900 SP .50 RPM 1150 BHP DNL

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
101	1	SA	10"			265	230		245			
102	2	SA	8"			160	170		170			
103	3	SA	8"			160	188		165			
104	4	SA	8"			160	185		160			
105	5	SA	8"			160	145		166			
106	6	SA	10"			255	315		260			
conf	7	SA	12"			430	440		435			
show	8	SA	10"			310	325		305			
Supply Air Total =						1900	1988		1906			
101	1	RA	10"			230	240		231			
102	2	RA	8"			145	140		140			
103	3	RA	8"			145	137		140			
104	4	RA	8"			145	140		145			
105	5	RA	8"			145	130		147			
106	6	RA	10"			195	280		198			
conf	7	RA	10"			310	278		310			
show	8	RA	10"			230	260		235			
RETURN Air Total =						1545	1605		1546			
OUTSIDE Air Intake =						340	383		360			

REMARKS:

RIVER CITY

Heating & Air Conditioning

AIR BALANCE REPORT

JOB NO. Inteltek
 SECTION _____ PAGE 2
 DATE 12/29/00

FAN & OUTLET TEST SHEET

AREA SERVED Comp rooms / Break room / Restrooms UNIT A/C-2

MOTOR NAMEPLATE DATA

MFG AO Smith FR _____
 HP 3/4 V 208 FLA 5.7
 PH L SF IH RPM 1175
 SHEAVE DATA:
 DIA _____ SHAFT _____
 ADJ _____ % _____ FIXED
 FAN NAMEPLATE DATA
 MFG RHEEM
 MODEL RRGG048074AJO
 SERIAL# _____
 SIZE 4 ton Gas/EIEC
 SHEAVE DATA:
 DIA _____ SHAFT _____
 BELTS Direct Drive

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS		<u>208</u>	
AMPS		<u>5.3</u>	
BHP		<u>DNL</u>	
RPM			
SP -			
SP +			
TSP			
FILTER SP			
CFM TOTAL	<u>1550</u>	<u>1550</u>	
CFM RA	<u>1410</u>	<u>1165</u>	
CFM OA	<u>140*</u>	<u>385*</u>	

FAN DESIGN DATA CFM 1550 SP 150 RPM 1150 BHP DNL

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM

REMARKS: No changes to existing system / Reset OSA for NEW People hood!

RIVER CITY

Heating & Air Conditioning

AIR BALANCE REPORT

JOB NO. InterTel

SECTION _____ PAGE 3

DATE 12/28/00

FAN & OUTLET TEST SHEET

AREA SERVED office 108+109, open office

UNIT A/C-3

MOTOR NAMEPLATE DATA

MFG. Ad Smith FR _____
 HP 3/4 V 208 FLA _____
 PH 1 SF IH RPM 1175

SHEAVE DATA:

DIA _____ SHAFT _____
 ADJ _____ % _____ FIXED X

FAN NAMEPLATE DATA

MFG. RHEEM
 MODEL BRGG048074HJQ

SERIAL#

SIZE 4 ton Gao/IEC

SHEAVE DATA:

DIA _____ SHAFT _____
 BELTS Direct Drive

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS		<u>208</u>	
AMPS		<u>5.6</u>	
BHP		<u>DNL</u>	
RPM		<u>1140</u>	
SP -			
SP +		<u>1.55</u>	
TSP			
FILTER SP			
CFM TOTAL		<u>1554</u>	
CFM RA		<u>1335</u>	
CFM OA		<u>219 #</u>	

FAN DESIGN DATA

CFM 1550 SP 1.50 RPM 1150 BHP DNL

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
108	1	SA	8"		150		110		154			
109	2	SA	8"		160		130		155			
109	3	SA	8"		150		138		140			
OPEN	4	SA	10"		310		270		290			
"	5	SA	8"		150		169		155			
"	6	SA	8"		150		175		160			
"	7	SA	10"		240		285		245			
"	8	SA	10"		240		298		255			
Supply Air Total =					1550		1575		1534			
108	1	RA	8"		135		145		130			
109	2	RA	10"		295		280		290			
OPEN	3	RA	12"		460		488		460			
Office	4	RA	12"		460		490		455			
Return Air Total =					1350		1403		1335			
outside Air Intake =					200		170		219			

REMARKS:

RIVER CITY

Heating & Air Conditioning

AIR BALANCE REPORT

JOB NO. Inteltek

SECTION _____ PAGE 4

DATE 12/28/00

FAN & OUTLET TEST SHEET

AREA SERVED OPEN office Area 107

UNIT A/C-4

MOTOR NAMEPLATE DATA

MFG AO Smith FR _____
 HP 3/4 V 208 FLA 5.7
 PH 1 SF TH RPM 1175

SHEAVE DATA:

DIA _____ SHAFT _____
 ADJ _____ % _____ FIXED X

FAN NAMEPLATE DATA

MFG RHEEM
 MODEL RRGG06074A1Q
 SERIAL# _____
 SIZE 5 ton Gas/IEEC

SHEAVE DATA:

DIA _____ SHAFT _____
 BELTS Direct Drive

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS		<u>208</u>	
AMPS		<u>5.5</u>	
BHP		<u>DNL</u>	
RPM		<u>1140</u>	
SP -			
SP +			
TSP		<u>150</u>	
FILTER SP			
CFM TOTAL		<u>1897</u>	
CFM RA		<u>1600</u>	
CFM OA		<u>297</u>	

FAN DESIGN DATA

CFM 1900 SP 150 RPM 1140 BHP DNL

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
<u>Open Area</u>												
<u>Office</u>	<u>1</u>	<u>SA</u>	<u>8"</u>		<u>180</u>		<u>187</u>		<u>185</u>			
	<u>2</u>	<u>SA</u>	<u>8"</u>		<u>180</u>		<u>165</u>		<u>178</u>			
	<u>3</u>	<u>SA</u>	<u>8"</u>		<u>180</u>		<u>174</u>		<u>180</u>			
	<u>4</u>	<u>SA</u>	<u>8"</u>		<u>180</u>		<u>181</u>		<u>175</u>			
	<u>5</u>	<u>SA</u>	<u>8"</u>		<u>180</u>		<u>170</u>		<u>184</u>			
	<u>6</u>	<u>SA</u>	<u>12"</u>		<u>490</u>		<u>540</u>		<u>495</u>			
	<u>7</u>	<u>SA</u>	<u>12"</u>		<u>490</u>		<u>565</u>		<u>490</u>			
<u>Supply Air Total</u>	<u>=</u>				<u>1900</u>		<u>1982</u>		<u>1897</u>			
<u>Open Area</u>												
	<u>1</u>	<u>RA</u>	<u>16"</u>		<u>950</u>		<u>1060</u>		<u>955</u>			
	<u>2</u>	<u>RA</u>	<u>14"</u>		<u>650</u>		<u>740</u>		<u>645</u>			
<u>Return Air Total</u>	<u>=</u>				<u>1600</u>		<u>1800</u>		<u>1600</u>			
<u>Outside Air Intake</u>	<u>=</u>				<u>300</u>		<u>182</u>		<u>297</u>			

REMARKS _____

RIVER CITY

Heating & Air Conditioning

AIR BALANCE REPORT

JOB NO. InterTel

SECTION _____ PAGE 5

DATE _____

FAN & OUTLET TEST SHEET

AREA SERVED Warehouse / Stockroom

UNIT A/C 5 & 6

AC-5 & 6
 MOTOR NAMEPLATE DATA
 MFG AC Smith FR _____
 HP 3/4 V 208 FLA 5.7
 PH 1 SFTH RPM 1175

SHEAVE DATA:
 DIA _____ SHAFT _____
 ADJ _____% _____ FIXED X

FAN NAMEPLATE DATA
 MFG RHEEM
 MODEL RRGG048074A1A
 SERIAL # AC-5 & 6
 SIZE 4 ton 600/1175

SHEAVE DATA:
 DIA _____ SHAFT _____
 BELTS Direct Drive

DATA ITEM	TEST 1	TEST 2	TEST 3
VOLTS			
AMPS			
BHP			
RPM			
SP -			
SP +			
TSP			
FILTER SP			
CFM TOTAL			
CFM RA			
CFM OA			

FAN DESIGN DATA _____ CFM _____ SP _____ RPM _____ BHP _____

no changes to Existing systems / checked & RESET OSA per Sq Ft Coverage

ROOM	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
	NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
<u>A/C-5</u>					<u>170</u>		<u>137</u>		<u>174</u>			
<u>AC-6</u>					<u>170</u>		<u>108</u>		<u>168</u>			

REMARKS: _____

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 191 LATHROP WY #G Permit No. 0011850

Building Use: OFFICE Occupancy: B

Building Owner: NORTH SAC. LAND CO. Construction Type: V-N

Owner Address: 400 SLOBE AV SACRAMENTO Sprinkled? Yes No

Portion of Building Occupied: SUITE G Area: 7817 Sq. Ft.

4/17/01 Willie Harris DENNIS RICHARDSON
Date By:Print Sign CITY BUILDING OFFICIAL

[Finaled By: MW ACJXEAL]

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.

POST IN A CONSPICUOUS PLACE